## CERTIFICATE OF RECYCLING/DEMANUFACTURING



The participating certified recycler or haul-away provider is responsible for removal and legal disposal of all replaced refrigerators, clothes washers and room air conditioners. All refrigerators, clothes washers and room air conditioners must be dismantled in order to prevent reuse. Parts may not be sold or distributed for reuse.

All refrigerators, clothes washers and room air conditioners must be sent to a shredding or baling facility for final destruction and recycling of materials. Please sign and date where indicated. By signing this Certificate, the certified recycler or haul-away provider agrees to abide by all federal, California and local laws and regulations concerning the safe and environmentally correct recycling/demanufacturing of appliances.

| APPLIANCE RECEIVER / RE  | CYCLER INFORM                  | NOITAN                    |  |
|--|--------------------------------|---------------------------|--|
| Please check the appropriate box indicating waretailer as part of a haul-away program, or by a |                                |                           | l to or picked up by a recycler (directly), by a   |
| ☐ Direct to recycling facility   | ☐ Retailer Haul-away program [ |                           | Utility haul-away program  |
| Name of Recycler / Retailer / Utility  |                                |                           | Recycler's / Haul-away Provider's<br>Certified Appliance Recycler Number                                   |
| Address  |                                |                           | Date of Delivery / Haul-away   |
|  | CA                             |                           |  |
| City   | State                          | ZIP                       | Phone  |
| Unit Was: Dropped off by custor  | mer Picked up                  | from residence            |  |
| RESIDENTIAL CUSTOMER I   | NFORMATION                     |                           |  |
| First Name   | Last Name                      |                           | Home Phone   |
| Address  |                                |                           | Mobile Phone (optional)  |
|  | CA                             |                           |  |
| City   | State                          | ZIP                       | E-mail   |
| APPLIANCE INFORMATION  |                                |                           |  |
| If you are receiving multiple appliances you mappropriate box indicating the appliance you     | nust provide one copy of th    |                           | oliance to be recycled. Please check the   |
| ☐ Clothes Washer ☐ Refrigerator  | ☐ Room Air (                   | Conditioner or Evap       | porative Cooler  |
| Brand/Make   |                                | Approximate Age (years)   |  |
| Model Number   |                                | Serial Number (if visible | le)  |
|  |                                |                           | ne above information is true and accurate and that<br>r Recycler for recycling in accordance with federal, |
| Appliance Receiver/Recycler Name   |                                | Name/Title (please print) |  |
|  |                                |                           |  |

Signature

Date